

# CHANCER OF THE TONGUE : TWO CASE REPORTS

BY

N. V. RAO,

*Adviser in Venereology, S.E.A.L.F.*

## Case Report, 1

An Indian N.C.O. was transferred to the venereal disease clinic at 93 I.G.H.(C) S.E.A.C., on Aug. 8, 1946, with a sore which he had for one month on the dorsum of the tongue. The blood Kahn test was positive. He denied any exposure or perverted sexual acts.

In March, 1946, this man had had sero-negative primary syphilis ; the penile lesions were located at 10 and 12 o'clock in the coronal sulcus. He had been treated with penicillin (60 injections of 40,000 units each). The sore had healed, and he had been discharged for routine surveillance.

On admission in August, 1946, he presented a circular (1 in. in diameter) indurated sore, raw ham in colour, situated on the centre of the dorsum of the tongue (Fig. 1). No slough was present. Submaxillary and submental glands were palpable, and there was a macular rash over the trunk with scattered papules ; there were moist papular syphilides on the scrotum. No mucous membrane lesion was present on lips, cheeks, or fauces. Numerous typical *treponema pallida* were found in the secretion from the ulcer in the tongue. There were indurated scars in the coronal sulcus at 10 and 12 o'clock, but no active penile lesions. Inguinal glands were palpable, discrete, and painless. No active penile sore or urethral discharge was present.

This case, originally one of sero-negative primary syphilis with penile lesions, reported with an ulcer on the dorsum of the tongue four months after the penicillin therapy. The ulcer had the clinical characteristics of a primary chancre. Taking into consideration the clinical features and the presence of

numerous *T. pallida*, a diagnosis of chancre of the dorsum of the tongue was made ; although it is realized that a gumma is the most common lesion in that situation.

Another interesting feature in this case was that it looked very much like a case of reinfection, the reasons for such an assumption being (1) previous sero-negative primary syphilis with penile lesions ; (2) the location of the present chancre in an entirely different position.

## Case Report, 2

A British N.C.O. reported on Sept. 20, 1946, having had an ulcer on the dorsum of the tongue for four days. He gave a history of exposure two weeks previously, the woman being a prostitute. A condom and an E.T. packet were used as prophylaxis. He denied any perverted sexual act. There was no previous history of venereal disease.

On examination a hard, raised, fissured ulcer was seen in the middle of the dorsum of the tongue (Fig. 2). The cervical glands were palpable, discrete, and painless. No skin or mucous membrane lesion was seen. There was no penile lesion present, nor any urethral discharge. *T. pallida* were found in the secretion from the lingual ulcer. The Kahn test was positive. On treatment with penicillin, arsenic, and bismuth the sore healed. The patient was discharged for surveillance on Oct. 18, 1946.

I am grateful to Colonel J. L. O'Neill, IMS/I.A.M.C. O.C., 93 I.G.H.(C) SEAC, for permitting me to publish these cases.